Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10749957

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS			40			\$	ı	RATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			↓ O mir	nus 20=	*20			X\$ 9=	180	OR	X\$18=	
INDEPENDENT CLAIMS) minus 3 = *					X43=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT	·			ı	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						column 2	Į	TOTAL	185	OR	TOTAL	
CLAIMS AS AMENDED - PART II								701712	(0)	J O	OTHER	THAN
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
		NTATION OF MU	JLTIPLE DEP	PENDENT	CLAIM			+145=		OR	+290=	
I	21						L	TOTAL			TOTAL	
		Α	DDIT. FEE	,	,	ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.65				
+145= OR +290=												
TOTAL ADDIT. FEE OR AL											TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C		REMAINING AFTER AMENDMENT		. NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=		OR	X86=	(T
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1	.000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Paid					r foun	d in the app	ropriate box	in col	umn 1.	